Inspection Report

BAYLOR COLLEGE OF MEDICINE

Customer ID: **1412**
Certificate: **74-R-0018**
Site: 001
BAYLOR COLLEGE OF MEDICINE

MAILSTOP: BCM310

HOUSTON, TX 77030

Type: ROUTINE INSPECTION
Date: Aug-10-2010

2.31 (c) (3)

INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC).

The reports must distinguish significant deficiencies from minor deficiencies. A significant deficiency is one which, with reference to Subchapter A, and, in the judgment of the IACUC and the Institutional Official, is or may be a threat to the health or safety of the animals. If program or facility deficiencies are noted, the reports must contain a reasonable and specific plan and schedule with dates for correcting each deficiency.

The semiannual facility inspection reviews dated 06/2009, 12/2009 and 06/2010 contained numerous significant deficiencies lacking a reasonable and specific plan and schedule with dates for correcting each deficiency. Management was informed that if the program or facility deficiencies are noted, the report must contain a reasonable and specific plan and schedule with dates for correcting each deficiency.
CORRECT PRIOR TO THE NEXT SEMIANNUAL INSPECTION.

2.32 (a)

PERSONNEL QUALIFICATIONS.

(a) It shall be the responsibility of the research facility to ensure that all scientists, research technicians, animal technicians, and other personnel involved in animal care, treatment, and use are qualified to perform their duties. This responsibility shall be fulfilled in part through the provision of training and instruction to those personnel.

Records dated April 27, 2010 indicated that a new principal investigator working with another colleague would be attempting to perform a surgical procedure indicated in an animal use protocol. The numbers reported to have been euthanized, prior to recovery from anesthesia and without anticipated data collected, exceeded the numbers anticipated for the protocol. In addition, the report indicated that in one surgical procedure, significant problems with anesthesia had arisen, requiring a third colleague to assist. When the committee was informed of the situation, anesthesia became their concern and the committee decided to add veterinary technical assistance. In addition, a veterinarian was requested to train the new principal investigator or to carry out the surgical procedure personally.

I inquired about what method is used to find out if PI s have the qualifications to perform procedures indicated in the animal use protocol. Management informed me that a questionnaire is used and their reply to the questionnaire is

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accepted by faith. I informed management that it is the responsibility of the research facility to ensure that all scientists, research technicians, animal technicians and other personnel involved with animal care, treatment and use are qualified to perform their duties. There should have been communication between the PI, AV, or the clinical veterinarian well before the numbers of animals lost to further research procedures exceeded expectations of the committee. This incident leaves one to believe that the PI was not qualified to conduct this procedure. In order to protect and handle animals in a humane manner, all personnel should show written proof of qualifications to perform procedures stated in the animal use protocol. As a scientist/researcher one must remember the three R s (refinement, reduction and replacement).
The clinical veterinarian assisted the new PI with the procedure with success.

2.33 (a)

ATTENDING VETERINARIAN AND ADEQUATE VETERINARY CARE.

(a) Each research facility shall have an attending veterinarian who shall provide adequate veterinary care to its animals. According to the policy #3 titled " Veterinary Care" states that the use of expired drugs, fluids, or sutures on regulated animals is not considered to be acceptable veterinary practice and does not constitute adequate veterinary care as required by the regulations promulgated under the Animal Welfare Act. All expired medical materials found in a licensed or registered facility are to be brought to the attention of the responsible official. The facility must either dispose of all such materials or segregate them in an appropriately labeled, physically separate location from non-expired medical materials. APHIS has no jurisdiction over facilities using expired medical materials for non-regulated activities. Two containers of expired fluids were observed in the animal lab. The expired fluids were discarded.

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